

Appendix A

Application for the review of a premises licence or club premises certificate under the Licensing Act 2003

PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

Before completing this form please read the guidance notes at the end of the form. If you are completing this form by hand please write legibly in block capitals. In all cases ensure that your answers are inside the boxes and written in black ink. Use additional sheets if necessary.

You may wish to keep a copy of the completed form for your records.

I P.C 1432 Chris Stevens on behalf of the Chief Officer of Police for Northamptonshire

(Insert name of applicant)

apply for the review of a premises licence under section 51 / apply for the review of a club premises certificate under section 87 of the Licensing Act 2003 for the premises described in Part 1 below (delete as applicable)

Part 1 – Premises or club premises details

Postal address of premises or, if none, ordnance survey map reference or description Kubus General Stores 105 Kettering Road	
Post town Northampton	Post code (if known) NN1 4AU

Name of premises licence holder or club holding club premises certificate (if known) Mr Pedram FARZENEH

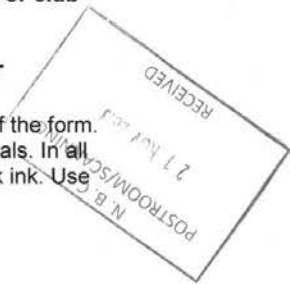
Number of premises licence or club premises certificate (if known) PL0211

Part 2 - Applicant details

I am

Please tick yes

- 1) an interested party (please complete (A) or (B) below)
- a) a person living in the vicinity of the premises
 - b) a body representing persons living in the vicinity of the premises
 - c) a person involved in business in the vicinity of the premises
 - d) a body representing persons involved in business in the vicinity of the premises



- 2) a responsible authority (please complete (C) below)
- 3) a member of the club to which this application relates (please complete (A) below)

(A) DETAILS OF INDIVIDUAL APPLICANT (fill in as applicable)

Please tick

Mr Mrs Miss Ms Other title
(for example, Rev)

Surname

First names

I am 18 years old or over

Please tick yes

Current postal
address if
different from
premises
address

Post town

Post Code

Daytime contact telephone number

E-mail address
(optional)

(B) DETAILS OF OTHER APPLICANT

Name and address

Telephone number (if any)

E-mail address (optional)

(C) DETAILS OF RESPONSIBLE AUTHORITY APPLICANT

Name and address P.C 1432 Chris Stevens, Northamptonshire Police C/O The Guildhall St Giles Street Northampton NN1 1DE
Telephone number (if any) 101 ext 345730
E-mail address (optional) Chris.Stevens@northants.pnn.police.uk

This application to review relates to the following licensing objective(s)

Please tick one or more boxes

- | | |
|---|-------------------------------------|
| 1) the prevention of crime and disorder | <input checked="" type="checkbox"/> |
| 2) public safety | <input type="checkbox"/> |
| 3) the prevention of public nuisance | <input type="checkbox"/> |
| 4) the protection of children from harm | <input type="checkbox"/> |

Please state the ground(s) for review (please read guidance note 1)

On behalf of the Chief Officer of Northamptonshire Police Mr ADDERLEY, I call for Review of the Premises Licence under the Licensing Objective of the Prevention of Crime and Disorder and the Protection of Children from Harm.

The basis for this review comes from three main issues of concern.

Firstly there is an evidential link between the premises and the sale of illicit tobacco which has been established over time despite warnings from Trading Standards regarding the illegality of the activity.

Secondly, a sale of illicit tobacco was made to a Test Purchaser aged 16 years old.

Thirdly, is the concern that despite numerous attempts to contact the Premises Licence Holder who is also the Designated Premises Supervisor, they have not returned any letters or attempted to contact either Trading Standards or the Borough Council Licensing Officers.

The Police and Trading Standards therefore believe that the current management of KUBUS are either not exercising sufficient control over the premises to ensure it is operating lawfully OR they are in fact fully aware of the issues and are either wilfully turning a blind eye to the activity or and actively involved in it.

In any case the concerns are sufficient to request a review of this premise licence.

Please provide as much information as possible to support the application
(please read guidance note 2)

In making this application, the Police and Trading Standards intend to rely on the following:

- 1) A summary of the timeline for the involvement of Trading Standards since September 2017.
- 2) A correspondence bundle outlining the attempts to communicate with the Licence Holder (and DPS).
- 3) Photographs evidencing illicit tobacco at the premises.
- 4) Statements from Mr Ian ELLIS and Mr Jason TOYNE in relation to attempts at contacting the Licence Holder.
- 5) Statement from Mrs Rachel BENNETT in relation to her involvement with the premises over time.

In applying for this review, the Police and Trading Standards have considered and will make arguments based on the following paragraphs of the Section 182 Guidance

11.18, 11.19, 11.20, 11.22, 11.23, 11.26, 11.27 and 11.28

Please tick yes

Have you made an application for review relating to this premises before

If yes please state the date of that application

Day Month Year

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If you have made representations before relating to this premises please state what they were and when you made them

Please tick yes

- I have sent copies of this form and enclosures to the responsible authorities and the premises licence holder or club holding the club premises certificate, as appropriate
- I understand that if I do not comply with the above requirements my application will be rejected

IT IS AN OFFENCE, LIABLE ON CONVICTION TO A FINE UP TO LEVEL 5 ON THE STANDARD SCALE, UNDER SECTION 158 OF THE LICENSING ACT 2003 TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION

Part 3 – Signatures (please read guidance note 3)

Signature of applicant or applicant's solicitor or other duly authorised agent (See guidance note 4). **If signing on behalf of the applicant please state in what capacity.**

Signature  1482

Date 19/11/18

Capacity Police Licensing Officer

Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 5)	
Post town	Post Code
Telephone number (if any)	
If you would prefer us to correspond with you using an e-mail address your e-mail address (optional)	

Notes for Guidance

1. The ground(s) for review must be based on one of the licensing objectives.
2. Please list any additional information or details for example dates of problems which are included in the grounds for review if available.
3. The application form must be signed.
4. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
5. This is the address which we shall use to correspond with you about this application.